

County: Sheboygan

Facility ID: 8150

Page 1

SHEBOYGAN RETIREMENT HOME & BEACH HCC  
930 NORTH 6TH STREETSHEBOYGAN 53081 Phone: (920) 458-2137  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/03): 84  
Total Licensed Bed Capacity (12/31/03): 84  
Number of Residents on 12/31/03: 84Ownership: Nonprofit Church  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? Yes  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 81

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.8
Supp. Home Care-Personal Care	No					1 - 4 Years		40.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.2	More Than 4 Years		20.2
Day Services	No	Mental Illness (Org./Psy)	45.2	65 - 74	6.0			----
Respite Care	No	Mental Illness (Other)	9.5	75 - 84	34.5			84.5
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.2		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	6.0	65 & Over	98.8	-----		
Transportation	No	Cerebrovascular	8.3		-----	RNs		13.7
Referral Service	Yes	Diabetes	11.9	Gender	%	LPNs		8.0
Other Services	No	Respiratory	3.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	14.3	Male	11.9	Aides, & Orderlies		
Mentally Ill	No		-----	Female	88.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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## Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	5	100.0	272	46	97.9	120	0	0.0	0	32	100.0	162	0	0.0	0	0	0.0	0	83 98.8
Intermediate	---	---	---	1	2.1	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1 1.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0 0.0
Total	5	100.0		47	100.0		0	0.0		32	100.0		0	0.0		0	0.0		84 100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	3.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	3.9	Bathing	1.2	79.8	19.0	84
Other Nursing Homes	10.4	Dressing	13.1	61.9	25.0	84
Acute Care Hospitals	64.9	Transferring	33.3	33.3	33.3	84
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	31.0	33.3	35.7	84
Rehabilitation Hospitals	0.0	Eating	73.8	11.9	14.3	84
Other Locations	16.9	*****				
Total Number of Admissions	77	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	2.4	Receiving Respiratory Care	7.1	
Private Home/No Home Health	17.8	Occ/Freq. Incontinent of Bladder	70.2	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	4.1	Occ/Freq. Incontinent of Bowel	39.3	Receiving Suctioning	0.0	
Other Nursing Homes	2.7			Receiving Ostomy Care	0.0	
Acute Care Hospitals	5.5	Mobility		Receiving Tube Feeding	1.2	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets	29.8	
Rehabilitation Hospitals	0.0					
Other Locations	20.5	Skin Care		Other Resident Characteristics		
Deaths	49.3	With Pressure Sores	6.0	Have Advance Directives	97.6	
Total Number of Discharges		With Rashes	2.4	Medications		
(Including Deaths)	73			Receiving Psychoactive Drugs	59.5	

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 50-99 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.4	92.0	1.05	87.1	1.11	88.1	1.09	87.4	1.10
Current Residents from In-County	88.1	85.9	1.03	81.0	1.09	82.1	1.07	76.7	1.15
Admissions from In-County, Still Residing	37.7	22.1	1.71	19.8	1.91	20.1	1.87	19.6	1.92
Admissions/Average Daily Census	95.1	138.9	0.68	158.0	0.60	155.7	0.61	141.3	0.67
Discharges/Average Daily Census	90.1	139.5	0.65	157.4	0.57	155.1	0.58	142.5	0.63
Discharges To Private Residence/Average Daily Census	19.8	64.3	0.31	74.2	0.27	68.7	0.29	61.6	0.32
Residents Receiving Skilled Care	98.8	96.1	1.03	94.6	1.04	94.0	1.05	88.1	1.12
Residents Aged 65 and Older	98.8	96.4	1.02	94.7	1.04	92.0	1.07	87.8	1.13
Title 19 (Medicaid) Funded Residents	56.0	55.4	1.01	57.2	0.98	61.7	0.91	65.9	0.85
Private Pay Funded Residents	38.1	32.6	1.17	28.5	1.34	23.7	1.61	21.0	1.82
Developmentally Disabled Residents	0.0	0.6	0.00	1.3	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	54.8	36.2	1.51	33.8	1.62	35.8	1.53	33.6	1.63
General Medical Service Residents	14.3	24.3	0.59	21.6	0.66	23.1	0.62	20.6	0.70
Impaired ADL (Mean)	47.6	50.5	0.94	48.5	0.98	49.5	0.96	49.4	0.96
Psychological Problems	59.5	58.5	1.02	57.1	1.04	58.2	1.02	57.4	1.04
Nursing Care Required (Mean)	5.8	6.8	0.85	6.7	0.86	6.9	0.84	7.3	0.79